Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |               |                                    |                  |                  |       | SMALL ENTITY TYPE  |                        |  | OTHER THAN<br>OR SMALL ENTITY |                        |  |
|--|--|---|---------------|------------------------------------|------------------|------------------|-------|--------------------|------------------------|--|-------------------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | 14            |                                    |                  |                  | i     | RATE               | FEE                    | ٦.                                     | RATE                          | FEE                    |  |
| FOR  |  |   | NUMBER FILED  |                                    | NUMBER EXTRA     |                  |       | BASIC FE           | 385.00                 | OR                                     | BASIC FEE                     | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | )   minus 20= |                                    | *                |                  |       | X\$ 9=             |                        | OR                                     | X\$18=                        |                        |  |
| INDEPENDENT CLAIMS   |  |   | ∫ minus 3 = * |                                    |                  |                  |       | X43=               | <u> </u>               | OR                                     | X86=                          |                        |  |
| Μl   | JLTIPLE DEPE                                   | NDENT CLAIM P                             | RESENT        |                                    |                  |                  |       | .4.45              | <u> </u>               | 1                                      |                               |                        |  |
| * If the difference in column 1 is less to   |  |   |               | than zero, enter "0" in column 2   |                  |                  |       | +145=              |                        | OR                                     | +290=                         | 224                    |  |
| CLAIMS AS AMENDED - PART II  |  |   |               |                                    |                  |                  |       | TOTAL              | <u> </u>               | OR                                     | TOTAL OTHER                   | 770                    |  |
|  |  | (Column 1)                                | (Column 2)    |                                    |                  | (Column 3)       |       | SMALL              | ENTITY                 | OR                                     | SMALL                         |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUME<br>PREVIO<br>PAID F  | BER              | PRESENT<br>EXTRA |       | RATE               | ADDI-<br>TIONAL<br>FEE |  | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus         | **                                 |                  | =                |       | X\$ 9=             |                        | OR                                     | X\$18=                        |                        |  |
|  | Independent                                    | *   | Minus         | ***                                |                  | =                |       | X43=               |                        | OR                                     | X86=                          |                        |  |
|  | FIRST PRESE                                    | JLTIPLE DEI                               | PENDENT       | CLAIM                              |                  |                  | +145= |                    | OR                     | +290=                                  |                               |                        |  |
|  | 1 -15  |   |               |                                    |                  |                  | I.    | TOTAL              |                        | ا <sub>م</sub> ا                       | TOTAL                         |                        |  |
|  | (Column 1) (Column 2) (Column 3)               |   |               |                                    |                  |                  |       | DDIT. FEE          |                        | <b>1</b> 011 /                         | ADDIT. FEE                    |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIO<br>PAID F  | ST<br>ER<br>USLY | PRESENT<br>EXTRA |       | RATE               | ADDI-<br>TIONAL<br>FEE |  | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus         | **                                 | •                | =                |       | X\$ 9=             |                        | OR                                     | X\$18=                        |                        |  |
|  | Independent                                    | *   | Minus         | ***                                |                  | =                |       | X43=               |                        | OR                                     | X86=                          |                        |  |
|  | FIRST PHESE                                    | NTATION OF MU                             | JLTIPLE DEF   | PENDENT                            | CLAIM            | <u> </u>         |       | +145=              |                        | OR                                     | +290=                         |                        |  |
| • *  |  |   |               |                                    |                  |                  | L     | TOTAL<br>DDIT. FEE |                        | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | TOTAL<br>ADDIT. FEE           | •                      |  |
| (Column 1) (Column 2) (Column 3)   |  |   |               |                                    |                  |                  | . ^   | DD11.1 EE 1        |                        | •                                      | DDII. FEEL                    |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER .<br>JSLY     | PRESENT<br>EXTRA |       | RATE               | ADDI-<br>TIONAL<br>FEE |  | RATE                          | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus         | **                                 |                  | =                |       | X\$ 9=             |                        | OR                                     | X\$18=                        |                        |  |
| AME  | Independent                                    | *   | Minus         | ***                                |                  | =                | -     | X43=               |                        | OR                                     | X86=                          |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                    |                  |                  |       |                    |                        |  |                               |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |               |                                    |                  |                  |       |                    |                        |  |                               |                        |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  TOTAL ADDIT. FEE  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |               |                                    |                  |                  |       |                    |                        |  |                               |                        |  |